Exhibit "C" – Affidavit of Kristy Simmons

IN THE UNITED STATES DISTRICT COURT FOR THE SOUTHERN DISTRICT OF MISSISSIPPI NORTHERN DISTRICT

SHEILA RAGLAND, AS THE ADMINISTRATRIX OF THE ESTATE OF MARIO CLARK, DECEASED, AND ON BEHALF OF THE WRONGFUL DEATH HEIRS OF MARIO CLARK, DECEASED **PLAINTIFFS**

VS.

CIVIL ACTION NO.: 3:22-CV-69-DPJ-FKB

CITY OF JACKSON, JAMES DAVIS, ANTHONY THOMPSON, DARRELL ROBINSON, DARRELL MCDUFFIE, ENEKE SMITH, in their individual and Official Capacity, and John Does, 1-4 **DEFENDANTS**

AFFIDAVIT OF KRISTY SIMMONS

STATE OF MISSISSIPPI COUNTY OF HINDS:

COMES NOW the within named Kristy Simmons, an adult resident citizen of Mississippi, who makes this Affidavit in the above-styled matter and states on her oath as follows:

- 1. My name is Kristy Simmons. I am an adult resident citizen of the State of Mississippi, over the age of 21, and not otherwise disqualified to testify.
 - 2. I am employed as Director of the State Medical Examiner's Office.
- 3. On February 21, 2019, J. Brent Davis, M.D., Former State Medical Examiner, conducted the autopsy of Mario Clark (Case No.: 19-0181). Soon after the autopsy, Dr. Davis completed a preliminary Pathological Examination report. See the Preliminary Pathological Examination Report attached hereto as Exhibit "A-1".
- 4. The preliminary Pathological Examination report is only an initial document and does not contain the final findings of the Medical Examiner.

- 5. In March of 2019, Dr. Davis left the Mississippi State Medical Examiner's Office without completing the Final Pathologic Diagnoses report regarding Case No.: 19-0181.
- 6. The Final Pathologic Diagnoses report was completed by Mark M. LeVaughn, MD, Forensic Pathologist and Associate State Medical Examiner. See the Final Pathologic Diagnosis Report attached hereto as Exhibit "A-2".
- 7. The Final Pathologic Diagnoses report contains the Medical Examiner's final findings based on the postmortem exam, toxicology report, medical records, and investigative information.
- 8. The Final Pathologic Diagnoses report is the final report containing the Medical Examiner's final diagnoses and opinion regarding Case No.: 19-0181.

AND FURTHER, Affiant saith naught.

Kristy Simmons, Director

Mississippi State Medical Examiner's Office

SWORN TO AND SUBSCRIBED BEFORE ME this the 15th day of

November 2023.

NOTARY PUBLIC

My Commission Expires XULL 10, 2024

NOTARY PUBLIC ID No. 209396 Commission Expires July 6, 2024

ANKIN COUN



Mississippi State Medical Examiner's Office 215 Allen Stuart Drive Pearl, MS 39208 601-420-9140



PATHOLOGICAL EXAMINATION

CASE: ME19-0181 **COUNTY:** Hinds

NAME OF DECEDENT: Mario Clark SEX: Male AGE: 31 yoa

DATE OF EXAMINATION: February 21, 2019

PRIMARY DIAGNOSIS

Blunt force injuries: Abrasions and contusions of skin Lacerations of liver Hemoperitoneum Mechanical/positional asphyxia/ strangulation Scleral hemorrhages Conjunctival petechiae, bilateral Hemorrhages of anterior neck soft tissue

CAUSE OF DEATH: Blunt force injuries with probable asphyxial component

MANNER OF DEATH: Homicide

Date: February 22, 2019 J. Brent Davis, M.D, State Medical Examiner

CERTIFIED COPY

I hereby certify that this is a true and accurate copy of the records on file at the Office of the

Médical Examinar Jackson, MS.

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MISSISSIPPI STATE MEDICAL EXAMINER'S OFFICE 215 ALLEN STUART DR. PEARL, MS 39208 601-420-9140



PATHOLOGICAL EXAMINATION

Clark, Mario

Case No. ME19-0181 County: Hinds

Sex: M Age: 31 Race: B

Date and Time of Autopsy: February 21, 2019 at 0900 Hours

FINAL PATHOLOGIC DIAGNOSES

PRIMARY DIAGNOSES:

- I. Geodon Toxicity
 - A. Evidenced by:
 - 1. Clinical evidence of acute cardiotoxic reaction following intramuscular administration of Geodon
 - B. Resulting in:
 - 1. Acute cardiac arrest
 - 2. Anoxic brain injury
 - 3. Respiratory failure
 - 4. Renal failure
 - C. Associated with:
 - 1. Non-lethal blunt traumatic injuries
 - a. Abrasions and contusions
 - b. Liver laceration

NAME Mario Clark CASE # ME19-0181

IDENTIFICATION:

A postmortem exam was performed on the body of Mario Clark at the Mississippi State Medical Examiner's Office in Jackson, Mississippi on February 21, 2019, by Dr. Brent Davis. This report is generated by Dr. Mark M. LeVaughn, based on a review of available postmortem exam documentation and a review of investigative information and medical records.

EXTERNAL EXAMINATION:

The body is that of a normally developed adult black male who appears to be the stated age of 31 years. The body is 68 inches long and weighs 200 pounds. The eyes are brown. The hair is black. The teeth are natural. Rigidity is 4+/4+. Lividity is poorly discernible. There is no clothing on the body.

X-RAY:

There are no x-rays on file.

EVIDENCE OF TREATMENT:

An ET tube is in the mouth. EKG pads are on the chest. Angiocatheters are in the right neck, left subclavian area, right arm and left arm.

EVIDENCE OF INJURY:

Two parallel healing abrasions are on the right forehead, 20x9 mm and 18x10 mm.

A healing abrasion is on the right side of the face below the lateral right eyelid, 3x2 cm.

A healing abrasion is on the left forehead, 17x6 mm.

A healing abrasion with a few cc of subcutaneous contusion is on the lateral left wrist, 22x8 mm.

A healing abrasion with a few cc of subcutaneous contusion is on the lateral right wrist, 19x11 mm.

There are multiple irregular healing abrasions on the right and left ankles.

There is subconjunctival and petechial hemorrhage in the right eye.

There is healing laceration of the liver at the falciform ligament.

There is documented mesenteric contusion.

NAME Mario Clark CASE # ME19-0181

INTERNAL EXAMINATION:

HEAD AND NECK:

Dissection of the scalp shows no evidence of soft tissue injury or skull fracture. Internal examination of the cranial cavity shows no evidence of hemorrhage or exudate. The brain weighs 1486 grams. There was no other documented evidence of any pathologic changes of the brain. Examination of the floor and the base of the skull shows no evidence of fracture.

There is no documented pathologic change or traumatic injury within the oral cavity. Dissection and examination of the neck shows soft tissue hemorrhage in the right side of the neck consistent with being produced by a dialysis catheter. There is no other pathologic change or traumatic injury to the soft tissue, cartilaginous or vascular structures of the neck. The upper airway is patent. The thyroid gland is otherwise unremarkable.

CHEST:

Dissection of the anterior chest shows a small amount of hemorrhage along the left clavicle. This is consistent with placement with a left subclavian angiocatheter. There is no evidence of rib or sternal fracture. Internal examination of the chest cavity shows the heart and lungs with the usual shape and in the usual position. The heart weighs 400 grams. The right lung weighs 1360 grams. The left lung weighs 1240 grams. There are no documented adhesions or pleural fluid. There are documented epicardial and pleural petechiae. There is no other identifiable evidence or documentation of pathologic changes of the heart or posterior mediastinum. There are no other documented pathologic changes of the lungs. The posterior ribs, lower cervical and thoracic vertebrae show no pathologic change or traumatic injury.

ABDOMEN:

The peritoneal cavity was documented to contain 800 ml of blood. There is a 2 cm healing laceration on the surface of the liver at the attachment of the falciform ligament. There is documented mesenteric contusion. There are no documented pathologic changes of the gastrointestinal tract including the esophagus. The visceral organ weights are: liver 1980 grams, spleen 120 grams, right kidney 220 grams, and left kidney 200 grams. The external and cut surfaces of the liver, gallbladder, pancreas, spleen, adrenal glands and kidneys show no other documented pathologic change or traumatic injury. Within the pelvis, the ureters and urinary bladder show no documented traumatic injury or pathologic change.

MICROSCOPIC DESCRIPTION:

Sections of the myocardium show no evidence of hemorrhage, necrosis, thrombosis, scarring or inflammation. Sections of lung show severe vascular congestion, diffuse alveolar hemorrhage and acute inflammation (ARDS). The liver shows focal capsular hemorrhage with fibrin formation. The hepatocytes show no pathologic change. The spleen is congested. The kidney shows no inflammation, hemorrhage or scarring. The adrenal shows a focal adenoma. The pancreas shows autolytic changes. Sections of the brain show edema and ischemic neurons.

NAME Mario Clark CASE # ME19-0181

CAUSE OF DEATH: Geodon Toxicity

MANNER OF DEATH: Accident

OPINION:

This 31-year-old male identified as Mario Clark died as a result of an acute toxic reaction due to the administration of the medication Geodon. Geodon is an antipsychotic medication with multiple known adverse cardiac and central nervous system effects. Following Geodon administration, he became unresponsive. He was admitted to the hospital, comatose (GCS 3) with a diagnosis of anoxic brain injury due to acute cardiac arrest. He remained ventilator dependent in the hospital for 5 days with additional development of respiratory failure, renal failure and brain death. Throughout his hospital course there was no clinical evidence of excess blood loss. Autopsy examination showed evidence of non-lethal blunt traumatic injuries consisting of abrasions of the face, wrists and ankles. There was conjunctival hemorrhage in the right eye. The hemorrhage in the right side of the neck was due to the placement of a dialysis catheter in the right jugular vein. The hemorrhage at the base of the left neck was due to placement of a left subclavian vein catheter. There were no identifiable lethal traumatic injuries. Toxicology showed the presence of Marijuana. Medical records and investigative records were reviewed. With the currently available information and postmortem findings, the cause of death is Geodon Toxicity, and the manner of death is Accident.

Mark M. LeVaughn, MD

Forensic Pathologist

Associate State Medical Examiner

MML